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24350 7590 10/31/2006

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/761,569	01/21/2004	John H. King	BU129/0BU34	3439

TITLE OF INVENTION: INFLATABLE RESPIRATOR HOOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	01/31/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS				
ALI, SHUMAYA B	3771	128-20120				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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(1) the name of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up-to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
1. STITES & HARBISON, PLLC
2. DAVID W. NAGLE, JR.
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

E.D. Bullard Company

Cynthiana, KY

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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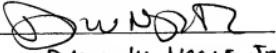
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Date

11/2/2006

Typed or printed name

DAVID W. NAGLE, JR.

Registration No.

42,923

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